

Office of Medicaid BOARD OF HEARINGS

Appellant Name and Address:



Appeal Decision:	Denied	Appeal Number:	2207947
Decision Date:	1/30/2023	Hearing Date:	11/25/2022
Hearing Officer:	Kimberly Scanlon	Record Open to:	12/29/2022

Appearance for Appellant:



Appearance for MassHealth:

Alexsandra DeJesus (on behalf of Patricia Rogers)



*The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Office of Medicaid
Board of Hearings
100 Hancock Street, Quincy, Massachusetts 02171*

APPEAL DECISION

Appeal Decision:	Denied	Issue:	Verifications
Decision Date:	1/30/2023	Hearing Date:	11/25/2022
MassHealth's Rep.:	Alexsandra DeJesus	Appellant's Rep.:	
Hearing Location:	Taunton MassHealth Enrollment Center Room 3 (Remote by telephone)	Aid Pending:	No

Authority

This hearing was conducted pursuant to Massachusetts General Laws Chapter 118E, Chapter 30A, and the rules and regulations promulgated thereunder.

Jurisdiction

Through a notice dated September 22, 2022 MassHealth notified the Appellant that he was not eligible for MassHealth long-term care benefits because he did not submit the information it needed to decide his eligibility within the required time frame. (See, 130 CMR 515.008; Exhibit 1). The Appellant filed this appeal in a timely manner on October 20, 2022. (See, 130 CMR 610.015(B); Exhibit 2). Denial of assistance is valid grounds for appeal (See, 130 CMR 610.032). At the conclusion of the hearing, the record was left open until December 29, 2022 for the Appellant to submit additional evidence.

Action Taken by MassHealth

MassHealth notified the Appellant that he is not eligible for MassHealth benefits because he did not submit the information it needed to determine his eligibility within the required time frame.

Issue

The appeal issue is whether MassHealth was correct in denying the Appellant's application for MassHealth long-term care benefits.

Summary of Evidence

A MassHealth representative appeared at the hearing via telephone and testified as follows: On August 10, 2022, MassHealth received a long-term care application on behalf of the Appellant. (See, Ex. 4, p. 14). On August 17, 2022, MassHealth sent a request of information to the Appellant. (See, Ex. 4, p. 15). On September 22, 2022, MassHealth denied the request for failure to receive all verifications. (See, Ex. 1; Ex. 4, p. 16). The Appellant appealed the denial and the record was left open for the Appellant to submit said verifications. As of the hearing date, the following verifications were still missing:

- Bank statements from August 1, 2020 to March 10, 2022 and from May 1, 2022 to present;
- Two most current and consecutive pay stubs from the Appellant's spouse.

(See, Ex. 1; Ex. 4, p. 16).

The Appellant's representative appeared at the hearing via telephone and testified that the Appellant's spouse approved a Power of Attorney to obtain the bank statements, however, she was having difficulty obtaining a letter from the bank that included the date of closure. As to the paystubs discussed above, the Appellant's representative explained that the Appellant's spouse was hesitant to submit paystubs because she feels that submitting such will include responsibility for paying MassHealth. The Appellant's representative further testified that the facility is going to issue an intent to discharge soon. The record was left open until December 29, 2022 for the Appellant to submit the outstanding verifications to MassHealth. (See, Ex. 5). At the close of business on December 29, 2022 MassHealth received some, but not all of the outstanding verifications which have been incorporated into the record as Exhibit 6. The MassHealth representative indicated that there were still outstanding verifications from unreported accounts and therefore the denial of long-term care benefits to the Appellant remains unchanged.

Findings of Fact

Based on a preponderance of the evidence, I find the following:

1. On August 10, 2022, MassHealth received a long-term care application on behalf of the Appellant.
2. On August 17, 2022, MassHealth sent a request of information to the Appellant.
3. On September 22, 2022, MassHealth denied the request because it had not received the outstanding verifications within the requested timeframe.
4. As of the hearing date, the following verifications were still outstanding: bank statements and pay stubs.

5. Following the hearing, the record was left open until December 29, 2022 for the Appellant to submit the outstanding verifications to MassHealth.
6. At the close of business of December 29, 2022, the MassHealth representative responded that MassHealth received some, but not all of the verifications and therefore upheld the denial of long-term benefits to the Appellant.

Analysis and Conclusions of Law

Applicants for MassHealth have an obligation to cooperate with the MassHealth agency in providing information necessary to establish and maintain eligibility and must comply with all rules and regulations of MassHealth, including recovery or maintaining other health insurance. (See, 130 CMR 515.008).

Once an application for MassHealth long-term care benefits has been submitted, the MassHealth agency requests all corroborative information necessary to determine eligibility. (See, 130 CMR 516.001). 130 CMR 516.019(B) provides the following, with respect to corroborative information:

- (1) The MassHealth agency sends the applicant written notification requesting the corroborative information generally within five days of receipt of application.
- (2) The notice advises the applicant that the requested information must be received within 30 days of the date of the request, and of the consequences of failure to provide the information.

130 CMR 516.001(C) sets forth the process regarding the receipt of corroborative information and provides as follows:

If the requested information, with the exception of verification of citizenship, identity, and immigration status is received within 30 days of the date of the request, the application is considered complete. The MassHealth agency will determine the coverage type providing the most comprehensive medical benefits for which the applicant is eligible. If such information is not received within 30 days of the date of the request, MassHealth benefits may be denied.

130 CMR 516.002 sets forth the process for reactivating an application after denial and provides as follows:

The MassHealth agency will reactivate the application after a denial of eligibility for failure to provide the requested verifications.

- (A) If the requested information is received within 30 days of the date of denial, the date of receipt of one or more of the verifications is considered the date of reapplication.
- (B) The date of reapplication replaces the date of the denied application. The applicant's earliest date of eligibility for MassHealth is based on the date of reapplication.

- (C) If a reapplication is subsequently denied and not appealed, the applicant must submit a new application to pursue eligibility for MassHealth. The earliest date of eligibility for MassHealth is based on the date of the new application.

In the present case, the Appellant was granted a post-hearing record open period to produce the outstanding information pertaining to the application received by MassHealth. Despite the additional time, the Appellant did not submit all outstanding information. Without this information, MassHealth is unable to make a determination regarding the Appellant's financial eligibility. Therefore, the action taken by MassHealth was within the regulations. See, 130 CMR 516.001. This appeal is denied.

Order for MassHealth

None.

Notification of Your Right to Appeal to Court

If you disagree with this decision, you have the right to appeal to Court in accordance with Chapter 30A of the Massachusetts General Laws. To appeal, you must file a complaint with the Superior Court for the county where you reside, or Suffolk County Superior Court, within 30 days of your receipt of this decision.

Kimberly Scanlon
Hearing Officer
Board of Hearings

cc:

MassHealth Representative: Justine Ferreira, Taunton MassHealth Enrollment Center, 21 Spring St., Ste. 4, Taunton, MA 02780, 508-828-4616

[REDACTED]